

APPLICATION FOR DEATH CERTIFICATE

To,

The Registrar of Births & Deaths,
and Health Officer, Jharsuguda Municipality
Dist.: Jharsuguda, Odisha

Sub : Issue of Death Certificate

Sir,

I am submitting the following particulars required for issue of Death Certificate under Section 17 of RBD Act. 1969 and corresponding state rules:

1. Name of the Deceased (Capital Letter): _____
2. Name of the Father/Husband(Capital Letter): _____
3. Sex : _____
4. Date of Death : _____
5. Place of Death : _____
6. Permanent address : _____

Full Signature of the Applicant

Mobile No.